

Atty. Dkt. No. 041673-2069

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Thomas J. Kipps

Title: NOVEL EXPRESSION VECTORS
CONTAINING ACCESSORY MOLECULE
LIGAND GENES AND THEIR USE FOR
IMMUNOMODULATION AND
TREATMENT OF MALIGNANCIES AND
AUTOIMMUNE DISEASE

Appl. No.: 08/982,272

Appl. Filing Date: 12/01/1997

Examiner: Phillip Gambel

Art Unit: 1644

CERTIFICATE OF FACSIMILE TRANSMISSION
I hereby certify that this paper is being facsimile transmitted to
the United States Patent and Trademark Office, Alexandria,
Virginia on the date below.

Line Gauthier
(Printed Name)
Line Gauthier
(Signature)

March 23, 2004
(Date of Deposit)

REQUEST FOR CONTINUED EXAMINATION (RCE)
TRANSMITTAL

Mail Stop RCE
Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

Sir:

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. This RCE and the enclosed items listed below are being filed prior to the earliest of: (1) payment of the issue fee (unless a petition under 37 C.F.R. § 1.313 is granted); (2) abandonment of the application; or (3) the filing of a notice of appeal to the U.S. Court of Appeals for the Federal Circuit under 35 U.S.C. §141, or the commencement of a civil action under 35 U.S.C. §145 or §146 (unless the appeal or civil action is terminated).

Enclosed are:

03/30/2004 NVILLARI 00000001X0087 Amendment/Reply.

01 FC:2801 385.00 DA

The filing fee is calculated below:

	Claims as Amended	Previously Paid For	Extra Claims Present	Rate	Fee Totals
RCE Fee 1.17(e):				\$770.00	\$770.00
Total Claims:	15	20	= 0	x \$18.00	\$0.00
Independents	1	3	= 0	x \$86.00	\$0.00
First presentation of any Multiple Dependent Claims:				+ \$290.00	\$0.00
				CLAIMS FEE TOTAL:	\$770.00
				CLAIMS AND EXTENSION FEE TOTAL:	\$770.00
[X]				Small Entity Fees Apply (subtract 1/2 of above):	\$385.00
[]				Suspension of action requested under 37 C.F.R. § 1.103(c)	\$0.00
				TOTAL FEE:	\$385.00

[X] Please charge Deposit Account No. 50-0872 in the amount of \$385.00. A duplicate copy of this transmittal is enclosed.

[X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Date 3-23-04

Respectfully submitted,

By Stacy L. Taylor

Stacy L. Taylor
Attorney for Applicant
Registration No. 34,842